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APPENDIX A

BEFORE THE INSURANCE COMMISSIONER
OF THE STATE OF WASHINGTON

In the Matter of the Application
regarding the Conversion and
Acquisition of Control of Premera Blue
Cross and its Affiliates

Docket No. G02-45

DECLARATION AND AGREEMENT
TO COMPLY WITH PROTECTIVE
ORDER AND CONFIDENTIALITY
AGREEMENT CONCERNING
CONFIDENTIAL AND ATTORNEYS'
EYES ONLY INFORMATION

DECLARATION AND AGREEMENT OF

1. My name is _____. I have
personal knowledge of the facts set forth in this Declaration and Agreement, and if called
and sworn as a witness, I would testify competently to those facts.

2. I live at _____.

3. I am employed as (state position): _____.

4. The full name and address of my employer is as follows:

_____.

4a. I am affiliated with the following Intervener:

_____.

1 5. I am aware that an order entitled Protective Order("Protective Order") has
2 been entered in the case of *In the Matter of the Application regarding the Conversion and*
3 *Acquisition of Control of Premera Blue Cross and its Affiliates et al.*, Docket No. G02-45
4 (the "Matter"), a matter before the Insurance Commissioner of the State of Washington
5 (the "Commissioner"). A copy of that Protective Order has been given to me. I have
6 carefully reviewed its provisions.

7 6. I am also aware that confidentiality agreements have been entered into
8 between Premera and the Interveners in the Matter ("Confidentiality Agreements"). I
9 have been provided with a copy of the Confidentiality Agreement executed by the
10 Interveners with which I am affiliated in this Matter, and I have carefully reviewed the
11 provisions of the Confidentiality Agreement. I understand that, if a document or other
12 information is produced pursuant to the Protective Order, that document or other
13 information is also subject to the provisions of the Confidentiality Agreement.

14 7. I understand and agree that documents, information, and tangible items
15 designated as Confidential Information and Attorneys' Eyes Only Information are subject
16 to the provisions of both the Protective Order and the Confidentiality Agreement.

17 8. In exchange for the opportunity to examine Confidential Information
18 and/or Attorneys' Eyes Only Information, I agree to comply with, and be bound by, the
19 provisions of both the Protective Order and the Confidentiality Agreement. I also agree
20 that the entity whose Confidential Information or Attorneys' Eyes Only Information I see
21 is an intended third party beneficiary of my agreement to so comply and be bound, and is
22 entitled to enforce it.

23 9. Without limiting the foregoing, I agree that I will not use or disclose any
24 document, deposition, information, or other material designated Confidential Information
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1 or Attorneys' Eyes Only Information, or discuss it with anyone, except as expressly
2 permitted under the provisions of the Protective Order, other than to persons permitted
3 access to such material under the Protective Order who have signed declarations under
4 penalty of perjury undertaking to preserve the Confidentiality of such material; provided,
5 however, that in no case shall I discuss Attorneys' Eyes Only Information with someone
6 who is only permitted to see Confidential Information.

7 10. I agree to use any material designated Confidential Information or
8 Attorneys' Eyes Only Information solely in connection with my participation in the
9 Matter and any appeals thereof, or appeals from actions taken in the course of the Matter,
10 and for no other purpose.

11 11. I agree that the entity whose Confidential Information and/or Attorneys'
12 Eyes Only Information I see may seek to obtain temporary, preliminary and/or permanent
13 injunctive relief against me for any disclosure or threatened disclosure of any Confidential
14 Information or Attorneys' Eyes Only Information in violation of the Protective Order or
15 the Confidentiality Agreement and/or contempt orders and/or damages against me and/or
16 others for any violation of the Protective Order or the Confidentiality Agreement.

17 12. I hereby agree and consent to the exercise of personal jurisdiction over me,
18 for purposes of obtaining and adjudicating any temporary, preliminary or permanent
19 injunction, contempt motion, dispute or claim regarding the disclosure or threatened
20 improper use or disclosure of any Confidential Information or Attorneys' Eyes Only
21 Information in violation of the Protective Order or the Confidentiality Agreement, and/or
22 for seeking contempt orders against me and/or for seeking damages against me for such
23 violations, by any state and federal court in the Western District of Washington and, to the
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1 extent permitted, by the Insurance Commissioner of the State of Washington and his
2 Special Master in this Matter.

3 13. I have been advised that I can seek advice of counsel before signing this
4 declaration, and I have either done so or have decided that I do not want to seek legal
5 advice.

6 I declare under penalty of perjury under the laws of the laws of the State of
7 Washington and of the United States of America that the foregoing declaration is true and
8 correct.

9
10 Executed this ____ day of _____, 2003, at _____, _____.

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14 _____[Print name]
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